



ALLERGY POLICY	
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## Allergy Policy

### Aims

To minimise the risk of any pupil suffering a serious allergic reaction whilst at school or attending any school related activity. To ensure staff are properly prepared to recognise and manage serious allergic reactions should they arise.

### Introduction

Around 2-5% of children in the UK live with a food allergy, and most school classrooms will have at least one pupil with allergies.

20% of serious allergic reactions to food happen whilst a child is at school, and these can happen in someone with no prior history of food allergy.

It is essential that staff recognise the signs of an allergic reaction and can manage it safely and effectively.

Allergy is the response of the body's immune system to normally harmless substances. These do not cause any problems in most people, but in allergic individuals the immune system identifies them as 'allergens' and produces an inappropriate 'allergic' response.

This can be relatively minor, such as localised itching, vomiting and pain, but it can also be much more serious, causing anaphylaxis which can lead to breathing problems and collapse. The most common cause of anaphylaxis in children/young people is foods. Symptoms often appear quickly and the 'first line' emergency treatment for anaphylaxis is adrenaline which is administered with an adrenaline auto-injector (AAI).

**Anaphylaxis** is a severe and potentially life-threatening allergic reaction. Anaphylaxis may occur within minutes of exposure to the allergen, although sometimes it can take hours. It can be life threatening if not treated quickly with adrenaline. Anaphylaxis can be accompanied by shock (known as anaphylactic shock): this is the most extreme form of allergic reaction. Common triggers of anaphylaxis include but are not limited to peanuts and tree nuts (most common triggers); other foods such as dairy products, egg, kiwi, fish, shellfish and soya; insect stings; latex; drugs.

Ballard School is committed to ensuring that all children with medical conditions, including allergies, in terms of both physical and mental health, are properly supported in school so that they can play a full and active role in school life, remain healthy and achieve their academic potential.

## Procedures

- Parents complete a medical form before their child's admission to the school and update this annually.
- There is a section on this form to indicate if their child has any allergies and to detail any regular medication that the child may be receiving for this condition and any emergency medication the pupil may need in the event of a severe allergic reaction.
- Parents are expected to inform the School Nurse of any changes to their child's medical condition and any new medication they may be taking. Pupils are made aware when they receive their auto-injectors from their consultants of how to use them and in what circumstance.
- Parents are responsible for ensuring any required medication is supplied, in date and replaced as necessary.
- The School Nurse will deliver a staff briefing annually, on what to do in the event of a severe allergic reaction and how to administer emergency medication in this situation. Staff are encouraged to attend the medical room for a practical demonstration of the use of auto-injectors and a brief talk about anaphylaxis before they go on any trips.
- Parents are asked to supply two adrenaline auto-injector devices and/or an oral antihistamine for their child, to be kept in the school office medical box clearly labelled with the pupil's name, photograph and medication details.
- Pupils in the senior school are encouraged to carry one auto injector with them and for the second to be kept in the school office.
- A sign out sheet is kept with the auto injectors which is completed if the auto injector is removed from the school office and when it is returned.
- The School Nurse monitors expiry dates on those auto-injectors kept in Main Office and Medical room and informs parents when they are due to expire.

## Emergency Treatment and Management of Anaphylaxis

### What to look for:

Symptoms usually come on quickly, within minutes of exposure to the allergen.

### Mild to moderate allergic reaction symptoms may include:

- a red raised rash (known as hives or urticaria) anywhere on the body
- a tingling or itchy feeling in the mouth
- swelling of lips, face or eyes
- stomach pain or vomiting.

### More serious symptoms are often referred to as the ABC symptoms and can include:

- AIRWAY - swelling in the throat, tongue or upper airways (tightening of the throat, hoarse voice, difficulty swallowing).
- BREATHING - sudden onset wheezing, breathing difficulty, noisy breathing.
- CIRCULATION - dizziness, feeling faint, sudden sleepiness, tiredness,
- confusion, pale clammy skin, loss of consciousness.

The term for this more serious reaction is anaphylaxis. In extreme cases there could be a dramatic fall in blood pressure. The person may become weak and floppy and may have a sense of something terrible happening. This may lead to collapse and unconsciousness and, on rare occasions, can be fatal.

If the pupil has been exposed to something they are known to be allergic to, then it is more likely to be an anaphylactic reaction.

Anaphylaxis can develop very rapidly, so a treatment is needed that works rapidly. Adrenaline is the mainstay of treatment, and it starts to work within seconds.

### What does adrenaline do?

- It opens the airways
- It stops swelling
- It raises the blood pressure

**As soon as anaphylaxis is suspected, adrenaline must be administered without delay.**

Action:

- Keep the child where they are, call for help and do not leave them unattended.
- LIE CHILD FLAT WITH LEGS RAISED – they can be propped up if struggling to breathe
- but this should be for as short a time as possible.
- USE ADRENALINE AUTO-INJECTOR WITHOUT DELAY and note the time given. AAls
- should be given into the muscle in the outer thigh. Specific instructions vary by
- brand – always follow the instructions on the device.
- CALL 999 and state ANAPHYLAXIS (ana-fil-axis).
- If no improvement after 5 minutes, administer second AAI.
- If no signs of life commence CPR.
- Call parent/carer as soon as possible.

Whilst you are waiting for the ambulance, keep the child where they are. Do not stand them up, or sit them in a chair, even if they are feeling better. This could lower their blood pressure drastically, causing their heart to stop.

All pupils must go to hospital for observation after anaphylaxis even if they appear to have recovered as a reaction can reoccur after treatment.

## Staff Training

All staff are trained on what to do in the event of an allergic reaction in a pupil or staff member. Allergy training is refreshed yearly, and new and temporary staff are trained as soon as they join the school to ensure confidence and competence.

Acting fast is key in reducing the risk of a serious allergic reaction.

Training includes:

- Knowing the common allergens and triggers of allergy
- Spotting the signs and symptoms of an allergic reaction and anaphylaxis. Early recognition of symptoms is key, including knowing when to call for emergency services
- Administering emergency treatment (including AAls) in the event of anaphylaxis –
- knowing how and when to administer the medication/device
- Measures to reduce the risk of a child having an allergic reaction e.g. allergen avoidance, knowing who is responsible for what
- Managing allergy action plans and ensuring these are up to date

## Catering

As part of the school's duty to support children with medical conditions, the school will provide safe food options to meet dietary needs including food allergy and intolerances.

- All food businesses (including school caterers) must follow the Food Information Regulations 2014 which states that allergen information relating to the 'Top 14' allergens must be available for all food products. Schools can therefore identify whether a food product is safe for allergic pupils to eat.
- School menus are available on request for parents to view with the ingredients clearly noted.
- Some product ingredient lists contain precautionary allergen labelling, e.g. "may contain X". Some pupils may be able to eat foods labelled as "may contain", but others may need to strictly avoid them.
- The catering department staff are informed of all pupils with allergies or food intolerances. A photo list of pupils with allergies and intolerances is available in the catering office and kitchens and this is regularly updated.
- All serveries/counters, function rooms and areas where food may be served display a 'please ask if you have any dietary requirements' sign.
- The catering department follow an allergen procedure -see appendix a

## Allergy safe Food Lessons

Allergic reactions are caused by the immune system responding to a food it mistakenly sees as harmful, and they can be life-threatening. Sometimes, even a trace amount of their allergen will make someone very unwell. People with food allergies must completely avoid eating and should avoid touching the food to which they are allergic. Therefore, education settings must have rigorous procedures in place to reduce risk for students with allergies during food lessons. These procedures should cover the safe storage, preparation, and cooking of food, including avoiding cross-contamination and the safe consumption of food.

- Staff who are teaching food technology have access to a list of all pupils with allergies or food intolerances.
- This information is available on registers on ISAMS and on SOCS from the start of the academic year and regularly updated.
- A photo list of pupils with allergies and food intolerances is available in the food technology classrooms and updated as needed
- An allergy safety check list is completed.

## Co-curricular Activities

Children with allergies have every opportunity to take part in co-curricular activities, out-of-school activities such as trips, sports fixtures and educational visits. Such activities require careful planning and preparation, but there is no reason to exclude a child with allergies.

- Information regarding pupils' allergies and food intolerances is kept in the medical room, school office, staff rooms, catering department and Food technology classrooms.
- Registers for lessons and extracurricular activities are checked against records on Isams and allergy/food intolerance lists provided.
- Checklist for allergy safety in school food activity completed.

## Trips

A pupil's allergy status is given to all trip leaders and sports team coaches. Staff are aware of the need to discuss with the School Nurse any pupils with specific health needs and medication, including allergies and anaphylaxis and the provision and use of auto-injectors. The School Nurse will be informed as soon as is practicably possible if any medication is given on a school trip or sports event.

## PE/Sports

It is expected that teachers and/or pupils bring their emergency medication to any sporting activity off site. Medical assistance should be sought immediately if a pupil is suffering from symptoms of anaphylaxis.

## Emergency/Spare Autoinjectors kept in school

As of 2017, schools and local authority-maintained nurseries can purchase spare adrenaline auto-injectors, used to treat anaphylaxis, as a back-up in the case of an emergency.

The MHRA clarified that the legal exemption under Regulation 238 of the Human Medicines Regulations 2012 permits a school's spare adrenaline auto-injector(s) to be used for any pupil or other person not known by the school to be at risk of anaphylaxis in an emergency. Written permission is not required. However, the MHRA highlighted that this was for exceptional circumstances only where the reaction could not have been foreseen.

[AAI\\_HMR238\\_Clarification\\_Dr\\_P\\_Turner.pdf \(publishing.service.gov.uk\)](#)

- There are 2 spare auto injectors kept in school in main office and in the medical room.
- These may be issued for a school residential trip according to risk assessment completed.

## Allergy awareness and nut free school

Ballard School supports the approach advocated by Anaphylaxis UK towards nut bans/nut free schools. They would not necessarily support a blanket ban on any allergen in any establishment, including in schools.

This is because nuts are only one of many allergens that could affect pupils, and no school could guarantee a truly allergen free environment for a child living with food allergy.

They advocate instead for schools to adopt a culture of allergy awareness and education.

A 'whole school awareness of allergies' is a much better approach, as it ensures teachers, pupils and all other staff are aware of what allergies are, the importance of avoiding the pupils' allergens, the signs & symptoms, how to deal with allergic reactions and to ensure policies and procedures are in place to minimise risk.

## Visitors to school

- All serveries/counters, function rooms and areas where food may be served display a 'please ask if you have any dietary requirements' sign.
- Food without gluten or dairy is clearly labelled
- All visiting teams for sports events, functions etc are required to notify the school if they have any dietary requirements or allergies

Please see links below for further information and resources for managing Allergies, Anaphylaxis and use of emergency autoinjectors in schools:

[https://assets.publishing.service.gov.uk/media/5a829e3940f0b6230269bcf4/Adrenaline\\_auto\\_injectors\\_in\\_schools.pdf](https://assets.publishing.service.gov.uk/media/5a829e3940f0b6230269bcf4/Adrenaline_auto_injectors_in_schools.pdf)

<https://www.anaphylaxis.org.uk/>

[Allergies at School | Allergy UK | National Charity](#)

<https://www.bsaci.org/professional-resources/resources/paediatric-allergy-action-plans/>

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## **Appendix A – Catering department Allergens Procedure**

All children are identified on enrolment and allergies are identified through a completed medical form.

The catering office, servery and kitchen have a comprehensive list of all students with allergies which is regularly updated

All menus are adapted to provide an allergen free equivalent for all allergies. this is communicated to students and staff upon request.

All serveries/counters, function rooms and areas where food may be served display a 'please ask if you have any dietary requirements' sign.

### **Preparation:**

- a meeting is held every day between designated allergen chef and front of house serving staff to confirm the days menu and quantities
- when making, the allergen meal is made by a designated chef with clean equipment as a separate job.
- if the menu allows it will be made first (before other production begins). alternatively, it will be made in a specified part of the kitchen away from other prep. in either case the chef will change their apron if necessary and use only purple chopping boards. the purple boards are cleaned thoroughly in the dishwasher between each use.
- each meal is prepared separately then stored in lidded labelled metal containers

### **Service:**

- children are known by name and either introduced to or known by photo to designated allergen chef/serving staff.
- each meal is prepared separately then stored in lidded labelled metal containers
- all heated allergen meals are held covered and labelled, if necessary, in a specific hot cupboard away from other food. all chilled food is clearly labelled and stored in separate, labelled area of the walk-in fridge
- colour code key on posters for guidance are in clear view in servery and kitchen.
- each meal is served individually to allergen students by the designated serving staff.
- serving staff use only colour coded serving utensils for allergens

yellow = gluten free, red = vegetarian, blue = vegan, black = dairy free

### **Storage:**

- all uncooked and cooked 'free-from' food is labelled and stored in separate areas of the walk-in fridge/freezer and dry store – away from other foods.

### **Visitors**

- all serveries/counters, function rooms and areas where food may be served display a 'please ask if you have any dietary requirements' sign.
- all visiting teams for sports events, functions etc are required to notify the school if they have any dietary requirements or allergies